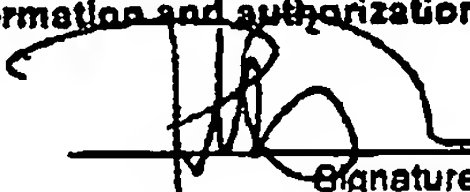


BAKER BOTTS LLP

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) A34614-A-PCT-USA-A (0700)								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;">In re Application of Fisher et al</td> </tr> <tr> <td style="padding: 2px;">Application Number 10/055,475</td> <td style="padding: 2px;">Filed January 22, 20</td> </tr> <tr> <td colspan="2" style="padding: 2px;">For USE OF MDA-5 AS AN ANTIVIRAL . . .</td> </tr> <tr> <td style="padding: 2px;">Group Art Unit 1636</td> <td style="padding: 2px;">Examiner Dunston, Jennifer Ann</td> </tr> </table>			In re Application of Fisher et al		Application Number 10/055,475	Filed January 22, 20	For USE OF MDA-5 AS AN ANTIVIRAL . . .		Group Art Unit 1636	Examiner Dunston, Jennifer Ann
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 80%;"> <p><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</p> <p><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</p> <p><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</p> <p><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</p> <p><input type="checkbox"/> Five months (37 CFR 1.17(a)(6))</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ <u>225</u>.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-4377</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> </div> <div style="width: 15%; text-align: right;"> <p>\$ _____</p> <p>\$ <u>450</u></p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> </div> </div>										
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 40%;"> <p><u>January 24, 2005</u></p> <p style="text-align: center;">Date</p> <p>PTO Reg No.: 52,217</p> </div> <div style="width: 50%; text-align: center;">  <p>Signature</p> <p><u>Peter J. Shen</u></p> <p>Typed or printed name</p> </div> </div>										
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>										
<p><input type="checkbox"/> Total of _____ forms are submitted.</p>										

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